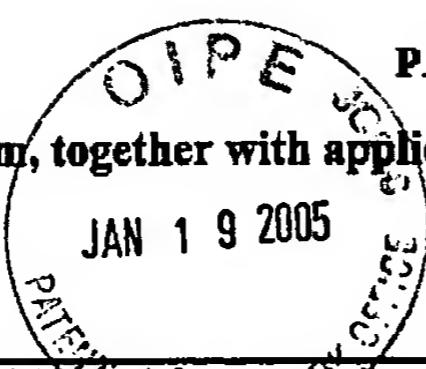


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Complete and send this form, together with applicable fee(s), to: **Mail**



**Mail Stop ISSUE FEE**  
Commissioner for Patents  
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7590

11/03/2004

Daniel D. Didrick  
853 Vanderbilt Beach Rd. 259  
Naples, FL 34108  
01/24/2005 RNEBRAH1 00000161 501321 10645211

01 FC:2501	700.00 OP
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*Jan 13, 2005*  
*103 elw*  
*Raymond Wagenknecht*

(Deposited)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION
10/645,211	08/21/2003	Daniel Dean Didrick		7256

TITLE OF INVENTION: ARTICULATED ARTIFICIAL FINGER ASSEMBLY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685	\$300	\$985	02/03/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
SNOW, BRUCE EDWARD	3738	623-064000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Raymond Wagenknecht  
 2. David R. Preston : Associates  
 3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recorded as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Gov

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment. Deposit Account Number 501321 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature David R. Preston

Date Jan 13, 2005

Typed or printed name David R. Preston

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